

Substitute for form 1449 SB/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete If Known	
				Application Number	10/519,008
				Filing Date	December 21, 2004
				First Named Inventor	Belanoff
				Art Unit	1617
				Examiner Name	Not Yet Assigned
Sheet	1	of	1	Attorney Docket Number	019904-002210US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
/K.B./	AA	US-6,340,696 B1	01-22-2002	Camden	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
/K.B./	AB	WO	96/36351	A1	11-21-1996			<input type="checkbox"/>
/K.B./	AC	WO	98/24451	A1	06-11-1998			<input type="checkbox"/>
/K.B./	AD	WO	00/32177	A2	06-08-2000			<input type="checkbox"/>
/K.B./	AE	WO	01/81359	A1	11-01-2001			<input type="checkbox"/>

Examiner Signature	/Kristie Brooks/	Date Considered	12/28/2007
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* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.